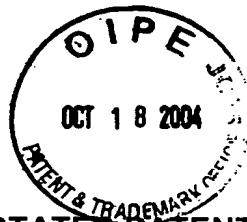


Attorney Docket No.: AP121TP



RECEIVED

OCT 21 2004

Technology Center 2600 PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Onur G. Guleryuz, et al.

Group Art Unit: 2676

Serial No.: 10/047,326

Examiner: Po Wei Chen

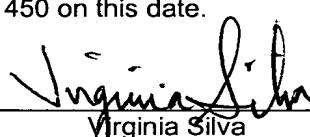
Filed: January 14, 2002

Title: Fast Text/Graphics Resolution Improvement with Chain-Code Table Look-Up

CERTIFICATE OF MAILING

I hereby certify that this transmittal and documents referred to as being enclosed are being deposited with the United States Postal Service as "First Class" mail with sufficient postage in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date.

Date: October 14, 2004


Virginia Silva

**RESPONSE TRANSMITTAL LETTER AND
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) (IF REQUIRED)**

MAIL STOP AMENDMENT
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application. The fee is calculated as shown below:

Claims Remaining After Amendment	Highest # Previously Paid For	# Extra	Rate	Additional Fee
Total Claims: 21	32	0	\$18.00	\$
Independent Claims: 3	5	0	\$88.00	\$
<input type="checkbox"/> 1st Presentation of Multiple Dependent Claims			\$300.00	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				\$

No additional fee is required.

Applicant(s) petition for an extension of time under 37 CFR 1.136 (fees: 37 CFR 1.17(a)-(d) for the total number of months checked below.

	Extension (Months)	Fee For Large Entity
<input type="checkbox"/>	One (1) Month	\$110.00
<input type="checkbox"/>	Two (2) Months	\$430.00
<input type="checkbox"/>	Three (3) Months	\$980.00
<input type="checkbox"/>	Four (4) Months	\$1530.00
	FEE:	\$

If an extension of time is required, please consider this a petition therefor together with authorization to charge Deposit Account No. 19-2746 for any extension fee.

Relative to response to the Final Office Action, an extension for _____ months has already been secured and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested.

Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

Enclosed is a Supplemental Information Disclosure Statement together with Form PTO-1449 listing one (1) reference.

Enclosed is a certification under 37 CFR 1.97(e).

The Commissioner is hereby authorized to charge the fee of \$180.00 under 37 CFR 1.17(p) to Deposit Account No. 19-2746.

Enclosed are replacement sheet(s) for Fig(s).

The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to our Deposit Account No. 19-2746.

Any additional filing fees required under 37 CFR 1.16.

Any patent application processing fees under 37 CFR 1.16.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to our Deposit Account No. 19-2746.

Any additional filing fees required under 37 CFR 1.16.

Any patent application processing fees under 37 CFR 1.16.

Enclosed is a Submission Under 37 CFR §1.129(a).

Enclosed is a Terminal Disclaimer And Certificate Under 37 CFR §3.73(b). The Commissioner is hereby authorized to charge the fee of \$110.00 under 37 CFR 1.20(d) to Deposit Account No. 19-2746. A duplicate copy of this transmittal letter is enclosed.

Please charge Deposit Account No. 19-2746 the sum of \$_____. A duplicate copy of this transmittal letter is enclosed.

Date: October 14, 2004

Respectfully submitted,



Michael T. Gabrik
Registration No. 32,896

Please address all correspondence to:
Epson Research and Development, Inc.
Intellectual Property Department
150 River Oaks Parkway, Suite 225
San Jose, CA 95134
Telephone No.: (408) 952-6000
Facsimile: (408) 954-9058
Customer No. 20178